



# Arizona Department of Transportation

## Motor Vehicle Division

1801 W. Jefferson, Mail Drop 522M, Phoenix, Arizona 85007-3276

Phone (602) 712-8300 - Fax (602) 712-6782

		For Office Use Only		
Application Number	License Number	Date Received	Date Approved	Date Issued

### ***LICENSE APPLICATION - MOTOR VEHICLE FUEL/LIQUID USE FUEL SUPPLIER***

#### **CORPORATION**

THIS APPLICATION MUST BE **TYPEWRITTEN** OR **COMPLETED IN INK**, IN ITS ENTIRETY AND BE **ACCEPTED AND APPROVED** BY THE ARIZONA DEPARTMENT OF TRANSPORTATION. A SUPPLIER LICENSE MUST BE RECEIVED PRIOR TO ENGAGING IN BUSINESS IN THE STATE OF ARIZONA. PLEASE MAIL THIS **ORIGINAL** APPLICATION, WITH THE APPROPRIATE ATTACHMENTS AND A **\$50.00** FEE, TO THE ADDRESS SHOWN ABOVE.

1. APPLICATION ELECTION:

- a. Application is for a license to be either: ☐ Supplier, (or) ☐ Supplier with a blanket election.
- b. Application is for a license to be a ☐ Permissive Supplier with a blanket election.

A blanket election under a. or b. is made pursuant to Arizona Revised Statutes § 28-5636 and § 28-5747. By making this election the applicant agrees to treat all removals from all of its out-of-state terminals with a destination in Arizona as shown on the terminal-issued shipping paper or bill of lading as if the removals were removed across the rack by the applicant from a terminal in Arizona for all purposes.

2. Applicant's **exact** corporate name as registered with the **Arizona Corporation Commission**

\_\_\_\_\_  
(Corporation)

3. Location of Corporate Office

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City) (State) (Zip Code)

\_\_\_\_\_  
(Area Code, Telephone Number, Fax Number)

4. Federal Employer Identification Number

5. All correspondence regarding this account is to be mailed to  
(Complete only if different from #3 above)

\_\_\_\_\_  
(Street Address or P O Box)

\_\_\_\_\_  
(City) (State) (Zip Code)

\_\_\_\_\_  
(Area Code, Telephone Number, Fax Number)

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- 6 a. Address where books and records are maintained  
(Complete only if different from #3 on page 1)

(Street Address)

(City) (State) (Zip Code)

(Area Code, Telephone Number, Fax Number)

- b. Person to contact regarding all licensing activities

(Name, Telephone Number, Fax Number)

- c. Person to contact regarding all tax reporting activities

(Name, Telephone Number, Fax Number)

- 7 a. List full name and title of corporate officers

Mailing address

(Attach additional list if necessary)

- b. List full name of directors

Mailing address

(Attach additional list if necessary)

- c. List full name of shareholders with a controlling interest in the corporation

Mailing address

(Controlling shareholder means all shareholders if there are 15 or less; if more than 15 shareholders, shareholders with five percent or more ownership interest.) Attach additional list if necessary.

- d. Have any of the **officers** or **controlling shareholders** of the corporation been convicted of any felony or misdemeanor involving motor vehicle fuel or liquid use fuel (diesel) taxes? ☐ Yes ☐ No

If yes, explain \_\_\_\_\_

8. Has the corporation had any type of license involving motor vehicle fuel or liquid use fuel revoked within the last ten years?

☐ Yes ☐ No

If yes, explain \_\_\_\_\_

9. Federal (637) Tax-Free Number \_\_\_\_\_

10. Have you held or do you currently hold a supplier, distributor, motor carrier, use fuel, IFTA, or IRP license issued by the Arizona Department of Transportation? ☐ Yes ☐ No If yes, please list license numbers by type of license

- 11 a. Date of incorporation  
State in which incorporated  
Arizona Statutory Agent:

(Name)

(Street Address)

(City) (State) (Zip Code)

(Area Code, Telephone Number, Fax Number)

- b. Is the corporation in good standing in the state of incorporation?

☐ Yes ☐ No

12. Corporation history in the fuel business:
- How many years has this corporation been in the fuel business? \_\_\_\_\_
  - How many years has this corporation been in the fuel business in the state of Arizona? \_\_\_\_\_
13. a. Currently does this corporation conduct fuel business using a d.b.a./trade name? ☐ Yes ☐ No  
If yes, list the current d.b.a./trade name used \_\_\_\_\_
- b. Has this corporation conducted business in the past using a d.b.a./trade name? ☐ Yes ☐ No  
If yes, list any prior d.b.a./trade name \_\_\_\_\_
- c. Does this corporation conduct any other business activity using a d.b.a.? ☐ Yes ☐ No  
If yes, list any d.b.a./trade names used \_\_\_\_\_
14. If the corporation is sent a request for information by the Arizona Department of Transportation concerning purchases or sales, or requested to provide records for transactions between your corporation and other business entities, which type of request procedure would you prefer: **(Check one of the following)**
- ☐ Letter ☐ Letter plus administrative subpoena ☐ Administrative subpoena with statutory service

**YES NO**

- ☐ ☐ Are you registered under Section 4101 of the Internal Revenue Code for transactions in the bulk transfer terminal system?
- ☐ ☐ Do you plan to be a shipper of record (position holder) on one of the commercial pipelines serving Arizona?
- ☐ ☐ Do you plan to import fuel into Arizona from a foreign country?
- ☐ ☐ Do you plan to import or export petroleum products into or out of Arizona from or to another state?
- ☐ ☐ Do you plan to acquire fuel in a two-party exchange?
- ☐ ☐ Do you plan to import fuel into Arizona as a position holder outside this state?
- ☐ ☐ Do you plan to take title to the gasoline/diesel?
- ☐ ☐ Do you plan to take physical possession of fuel in Arizona?
- ☐ ☐ Do you plan to purchase gasoline or diesel blending stocks? (Other than oxygenates or jet fuel for winter blending of diesel)
- ☐ ☐ Do you plan to blend these stocks into gasoline or diesel for resale?
- ☐ ☐ Do you plan to purchase transmix, burner oil, road oil, or other petroleum products not normally labeled blending stock?
- ☐ ☐ Do you plan to sell aviation fuel?
- ☐ ☐ Do you manufacture and produce gasoline/diesel?
- ☐ ☐ Do you expect to maintain bulk storage facilities in Arizona?
- ☐ ☐ Do you plan to sell motor vehicle fuel, liquid use fuel, or blending stocks on consignment?
- ☐ ☐ Do you have any petroleum product refining capabilities?
- ☐ ☐ Do you own, control, or have a controlling interest in a refinery?
- ☐ ☐ Do you have or plan to have a business location in Arizona? (**"Business location" is defined as an actual office or facility location, an employee or agent, other than statutory agent, representing the company, or the ownership or leasing of a storage facility in Arizona.**) If yes, please list name and address. \_\_\_\_\_
- ☐ ☐ Does this corporation own or control other businesses in the petroleum industry (e.g. other suppliers, distributors, transporters, retail, terminal storage etc.)? If yes, explain \_\_\_\_\_
- ☐ ☐ Does any officer, director, or controlling shareholder own or control any petroleum business, which operates in Arizona (e.g. other suppliers, distributors, refiners, transporters, retail, terminal storage etc.)? If yes, explain \_\_\_\_\_
- ☐ ☐ Do you or any officer, director, or controlling shareholder own or control any petroleum transport equipment for use in Arizona? If yes, explain: \_\_\_\_\_
- Were the prior operating year's financial statements, i.e. income statement, balance sheet, etc.:
  - ☐ ☐ Certified?
  - ☐ ☐ Reviewed?
  - ☐ ☐ Compiled?
  - ☐ ☐ None of the above?
 If the corporation does not have financial statements for the prior year, please explain \_\_\_\_\_

37. Please provide the name, address, and telephone number of the accounting firm and/or accountant that performed the service referenced in item 36. If prepared by corporation, please indicate. \_\_\_\_\_

38. Licensing affiliations:

a. List any officer, director, or controlling shareholder of this applicant that is or has been an officer, director, controlling shareholder, partner or sole proprietor of any entity which currently has or has had, within the last seven years, an Arizona Motor Vehicle Fuel Distributor's/Supplier's license, a Use Fuel Vendor's license, or a Use Fuel/IFTA license. (Controlling shareholder means all shareholders if there are 15 or less; if more than 15 shareholders, shareholders with five percent or more ownership interest.) Provide the name of the account and the name and relationship of the person associated with the account holder. \_\_\_\_\_

(Attach additional list if necessary)

b. Is any officer, director or controlling shareholder currently, or been within the last seven years, a licensed supplier or distributor in another state? ☐ Yes ☐ No If yes, please list which states, time periods involved and if currently operating in any other state, please attach copies of those licenses. \_\_\_\_\_

39. Is this corporation now, or has it been in the last seven years, a licensed supplier or distributor in another state? ☐ Yes ☐ No If yes, please list which states, time periods involved and if currently operating in any other state, please attach copies of those licenses. \_\_\_\_\_

40. List locations of fuel handling and storage facilities. (Attach additional list if necessary) \_\_\_\_\_

41. Bulk Storage arrangements:

a. What is your **Arizona** bulk fuel storage tank gallon capacity: above ground \_\_\_\_\_ below ground \_\_\_\_\_

b. Do you plan to participate in a community storage tank facility? ☐ Yes ☐ No If so, with whom? \_\_\_\_\_

c. If no bulk storage facility is owned, explain storage arrangements. \_\_\_\_\_

42. List expected sources of petroleum products \_\_\_\_\_

43. Percentage of fuel you have title to which is stored under the control of another person or company: Gasoline \_\_\_\_\_ Diesel \_\_\_\_\_. List name and address of such person or entity. \_\_\_\_\_

44. a. If this is a newly acquired business, was it previously licensed as either an Arizona distributor or an Arizona supplier? ☐ Yes ☐ No

b. If yes, what was the account number? \_\_\_\_\_

c. From whom did you acquire the business? \_\_\_\_\_

d. How many gallons of fuel were in storage tanks at the time of purchase? Gasoline \_\_\_\_\_ Diesel \_\_\_\_\_

45. Please provide a brief corporate history and a short description of current and projected operations. \_\_\_\_\_

## AFFIDAVIT OF APPLICANT (S)

The undersigned hereby swears or affirms under penalty of perjury that I am duly authorized to make the foregoing Application, and hereby swear or affirm that the Application and all attachments are true and correct representation(s) of the premises to be licensed and agree that the place of business, if licensed, may be inspected during business hours, or at any time business is being conducted on the premises, by officials and agents of the Arizona Department of Transportation, for purposes of determining compliance with the Arizona Motor Vehicle Fuel and Liquid Use Fuel laws.

STATE OF \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

County of \_\_\_\_\_

\_\_\_\_\_  
Print or Type Applicant Name  
(Corporate Officer)\_\_\_\_\_  
Title

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_ My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Notary Public**WARNING**

**Read Carefully. This instrument is a sworn document. False answers could result in penalties and/or denial of your Application.**

**THE SIGNATURE OF THE APPLICANT MUST BE NOTARIZED.**

**SUPPLIER BUSINESS ACTIVITIES CONDUCTED IN THE STATE OF ARIZONA PRIOR TO THE ISSUANCE OF A LICENSE SHALL BE SUBJECT TO SEVERE PENALTIES.**

**THE LICENSE SHALL NOT BE ASSIGNABLE AND SHALL BE VALID ONLY FOR THE PERSON, FIRM, OR CORPORATION TO WHOM ISSUED, AND SUCH LICENSE SHALL BE PLACED IN A CONSPICUOUS PLACE IN THE BUSINESS OR BUSINESSES FOR WHICH IT IS ISSUED, AND SO DISPLAYED.**

**THE CORPORATE STATUS OF ALL ARIZONA CORPORATIONS WILL BE VERIFIED WITH THE CORPORATION COMMISSION PRIOR TO THE ISSUANCE OF A LICENSE.**

**THE INFORMATION PROVIDED IN THIS APPLICATION IS CONFIDENTIAL.**